Summary Minutes

Meeting of the

Emergency Medical Services Regulatory Board 2829 University Ave., SE Minneapolis, MN 55414

10:00 a.m., November 15, 2012

Members Present	Members Absent	<u>Guests</u>	<u>Staff</u>
Kelly Spratt, Chair	Jennifer Deschaine	Rob Carlson	Pam Biladeau, Executive Director
Lisa Consie	Sen. Gretchen Hoffman	Richard Greene	Will Granger
Steve DuChien	Paul Satterlee, M.D.	Don Hauge	Melody Nagy
Michael Gormley	Mari Thomas, M.D.	Joe Kelly	Robert Norlen
J.B. Guiton		Kim Ketterhagen	Jennifer Ojiaku
Kathleen Haney		Kjelsey Kluge	Rose Olson
Michael Jordan		Marion Larson	Debby Teske
Paula Fink Kocken, M.D.		Judy Marchetti	
Pat Lee		Bruce Messelt	Barb Deming, MAD
Gary Pearson		George McMahon	Goeffrey Karls, AGO
Rep. Duane Quam		Cheryl Pasquarela	Greg Schaefer, AGO
(by phone)		Darel Radde	
Jill Ryan Schultz		Aarron Reinert	
Mark Schoenbaum		Scott Reiten	
Matt Simpson		Ron Robinson	
Marlys Tanner		Gabe Romero	
		Bill Snoke	

I. Call to Order

Mr. Spratt called the meeting to order at 10:02 a.m. Mr. Spratt announced that the meeting will be going into closed session to discuss a disciplinary matter.

II. Closed Session

The closed session ended at 11:12 a.m. Mr. Spratt opened the meeting and asked for introductions from members and guests.

III. Approval of Agenda

Mr. DuChien moved approval of the agenda. Ms. Tanner seconded. Motion carried.

IV. Approval of Minutes

Mr. Guiton moved approval of the October 9, 2012 minutes. Ms. Ryan Schultz seconded. Motion carried.

V. Chairs Remarks

Mr. Spratt said that the Board will be conducting the election of officers today; this was delayed until we had our Board members reappointed. He suggested that the officers elected continue through 2015. Mr. Guiton moved that the officers elected today would hold their offices until 2015. Ms. Tanner seconded. Motion carried.

Mr. Spratt said that as the Chair that there have been a number of events that have occurred and he wanted to ask that the Executive Committee meeting and Finance Committee meet during the same time period on off Board meeting months. He said that we want these scheduled.

Mr. Pearson moved to schedule the Finance Committee and Executive Committee meetings into sequential meetings on the same date. Mr. Lee seconded. Motion carried.

VI. Regions-Chisago and Isanti

Mr. Spratt said that this issue was discussed at a previous Board meeting. These two counties made a request to join the metro region. The Board discussed the nuances of this request. It was suggested to form a task force to discuss this issue but a number of Board members would have a conflict of interest. Mr. Schaefer, Ms. Biladeau, and I have discussed this issue and are offering a resolution that does not require action by the Board.

Mr. Schaefer stated the Emergency Medical Services Regulatory Board ("EMSRB") has recognized the eight EMS regions since the licensing and regulation of EMS was transferred from the Minnesota Department of Health ("MDH") to the EMSRB by the authority granted under Minn. Stat. Chapter 144E. The limited powers of the EMSRB over the eight regions involve the distribution of funds and required audits, as provided in Minn. Stat. 144E.50, Subds. 5 and 6. He quoted the statute.

Mr. Schaefer did not find any statutory authority within Chapter 144E that would provide EMSRB the authority to dictate which counties make-up the membership of an EMS region. An EMS region is formed by counties agreeing to terms outlined in a legal agreement, such as, a Joint Powers Agreement. The EMSRB is not a party to the EMS Region's legal agreement.

Mr. Schaefer had reviewed documents from Chisago and Isanti Counties providing notice to the EMSRB that they have withdrawn from the Central EMS Region and are in the process of joining the Metro EMS Region. Chisago and Isanti Counties were not asking for EMSRB approval, only to recognize the realignment when drawing regional boundary lines.

According to Mr. Schaefer the number of counties in each region would not impact EMSRB's responsibility to disburse available funds evenly among the eight regions. EMSRB would continue to disburse one-eighth of the available funds to the Central EMS Region and one-eighth to the Metro EMS Region. Other than for funding, the EMSRB is under no obligation to use realigned regional boundary lines for other administrative purposes.

Mr. Schoenbaum asked about the statute language referring to "designated regional emergency medical services system". He asked how this is interpreted by Mr. Schaefer. Mr. Schaefer said the language is contained in Minn. Stat. 144E.50 under the heading, *Emergency Medical Services Fund*. The eight EMS regions are "designated" by the Board recognizing the eight EMS regions currently in existence when dispersing funding. Mr. Schoenbaum asked if this is self-designated. Mr. Schaefer said the eight regions designated for funding were already in existence when the EMSRB was created and would continue to exist. This Board does not have the power to reduce or add to the eight designated EMS regions. Mr. Schoenbaum asked if the regional programs appear anywhere else in statutes. Mr. Schaefer said he did not research this. Ms. Biladeau said that she did not find it in any other place than seat belt funds.

Mr. Jordan asked if there is anything in the MDH statute that governs the regions. Mr. Schaefer said that MDH's authority to recognize regional boundaries as needed for their programs was not transferred to EMSRB. Mr. Jordan asked what the concept was to decide how the eight regions were composed. How many counties would be in each region? Where does this authority to designate the regions lie? Mr.

Schaefer said Chapter 144E does not provide the answers to these questions; however this does not impact the Board's authority to fund the regional programs.

Mr. Guiton said that he thought this was in rule – once. Mr. Guiton said that the Board's decision is in changing the map. The regions can do what they wish for realignment.

Mr. Snoke said that there were federal grants in the 1970s and there was regulation that defined who was in what region. Those days are gone and times have changed.

Mr. Reiten said that the RFP spells out the counties in each region. When the RFP is put out that would need to be changed. Mr. Schaefer said that the Metro EMS Region would need to include the two newly joined counties to their RFP and the Central EMS Region would need to remove the two counties. The contracts currently in force do not need to be changed as funding is issued to the region and not to counties. Mr. Reiten asked how you would describe a region in the RFP.

Mr. Reinert said that there has been misinformation – we are not here to say that one region is bad and one region is good. This is a reflection of how the regions are reflected today. Our patients are served in the metro area. We work with the Metro Region for emergency preparedness and we respond in the metro area. The conversation that we wanted to have is to have is alignment of the regions. We have been supported by both regions. This is not a predecessor to changing the funding format. This was handled unofficially for many years with the Metro Region.

Mr. Lee said that he would be speaking on behalf of the other regional directors and we understand that the Board cannot change the boundaries. We understand about responding in the metro area. How can we not let this happen again? We are opening a "Pandora's box". This could lead to changes in other regions and may require legislation.

Mr. Spratt said that he read the letter that raised questions on determining factors for regions. Mr. Spratt said that we are getting to the end of the strategic planning process and this is another large issue. This raises the root of many questions. My preference is to finish strategic planning first. Do we have the bandwidth and staff to take on the grant process? Do we possess that expertise? Mr. Spratt said that his goal is to get the Board focused on what we should or should not do. What is the accountability and who should go forward with this? The grants are in place through June. We will be finishing strategic planning. The questions will return. This briefing provided information to the Board. Sometime in the future we will again deal with this issue.

Mr. Messelt, Commissioner, Chisago County, said that he appreciated the Board hearing the issue. We would like an action from the Board on the map issue. We are having discussions with the Metro Region on this. Lack of action will cause a problem because we are no longer represented in the Central Region.

Mr. Pearson asked if a county came to you Mr. Lee would you consider adding a county to your region. Mr. Lee said that he has been approached by other counties. He said that would be an Arrowhead EMS Board decision. Mr. Pearson said that this would not be a good fit if this is not adjoining the region. Mr. Lee said that HSEM has different boundaries than the EMSRB and that can cause some confusion. We deal with homeland security and others that are overlapping.

Mr. Robinson said that Chisago and Isanti looked at the EMS system. The letters from the regions describe what the regions wanted to accomplish with this change. Does this make sense? For Chisago and Isanti, yes. He also agreed that this will be a discussion in the future. We are looking for the Board to take action.

Ms. Pasquarela asked if this affects grant money. Who allocates the funding of the grants? Mr. Spratt said the Board is the current administrator of the grant through statute with equal funding for each region. If we change this how do we make the changes?

Ms. Ryan Schultz said that counties changing regions would be a problem without adequate compensation. I realize the situation we are going to have to address the funding. If we start now where will it stop?

Mr. Schaefer said that a region has a disincentive to take on other counties. In a region in which counties have withdrawn, there would be more funds available to the remaining counties.

Mr. Jordan said that one day someone is going to look back at the Boards' decision. He asked that Mr. Schaefer repeat the language of the Boards authority.

Mr. Schafer read the statute on funding for the regions that states that there are eight regions and there will remain eight regions based on this statute and the funding will remain equal. Mr. Jordan asked what "designation by the Board" means. Mr. Jordan said that the Board has the authority to designate the eight regions. How was this decision made? Mr. Spratt said that this was designated by the grants in the 1970's when EMS was part of the Minnesota Department of Health.

Mr. Schaefer said that when this Board was designated the authority came with it for equal funding for the eight regions. Mr. Jordan said that we have no decision to make at all. We get a certain amount of funds and we give it to the eight regions equally. He said that the regions can make the decision to move. Why do we want to continue this discussion?

Mr. Schaefer said that if the metro region accepts these counties will the Board accept the changes to the map and change the designation for the RFP. Mr. Jordan said that is not a choice we make. The map does not change. We divide the funds and give it to the eight regions and it does not matter how many counties are in each region. Mr. Guiton said that the map needs to change to move them out of the Central Region to the Metro Region. Mr. Schaefer said that appears to be the request of Chisago and Isanti Counties. Mr. Jordan said we give money to regions not to counties. If someone asks for money but wants to withdraw from the region then they would not receive funding. Mr. Schoenbaum said that we should follow the local agreement. Chisago and Isanti could form their own region. But they would not get money.

Mr. Jordan said that we have a failure of policy. Who is the entity who would do that? The statute says that there can only be eight regions. Mr. Pearson said that we make this decision in the RFP process. When we approve the RFP we are approving the funding for the eight regions. Money goes to a specific entity. We are not approving the regional structure just the funding.

Mr. Jordan asked if anyone can apply to be a region. Mr. Guiton said that anyone can apply but they must represent the whole region.

Mr. Spratt said that the county will be homeless without designation. Mr. Messelt said that we have not found statutes that determine regions. Chisago and Isanti have left the Central Region. We are not members of their joint powers agreement. We want the Board to recognize this. We have petitioned the Metro Region to apply to their region. This was accomplished with memorandums of understanding. He asked for a change in the map. The Metro Region would prefer that the Board acknowledges this change. He said that we are not interested in a funding change. This will just change the number of counties in the region.

Mr. Schafer asked if the Metro EMS Region accepted the counties. We do not want to recognize a change that has not yet been voted on. In the metro joint powers agreement page five "the board is authorized to take action ... "

Mr. Robinson said that this change was made a year ago. Mr. Messelt said that this change was made by Metro Region Board a year ago. Mr. Schaefer again asked for clarification if the Metro EMS Region has accepted Chisago and Isanti Counties. Mr. Jordan asked what is needed from the Metro Region.

Mr. Jordan moved that when the Board receives the appropriate documentation from any appropriate regional emergency medical services system(s) that a county has been accepted as a member of that regional emergency medical services system then the EMSRB shall redraw the map on the website to reflect the changes in the affected regions. Dr. Fink Kocken seconded.

Mr. Guiton asked if this would require additional staff time to change the map. Ms. Biladeau said that it would be best noted in the contracts and would be then be discussed when the Board decisions occur during the contract extension and RFP process. Mr. Lee asked where we are going forward now. Will this require legislation? Mr. Spratt said that if other counties come forward there is nothing prohibiting us from doing the same thing. Mr. Pearson said that he does not see any advantage for the region if a county wanted to move to a new region since there will be no additional monies going to that region and he asked why would a region accept additional counties if there is no advantage to them financially and would you (Mr. Lee) accept a new county if there was no strategic advantage for the county to change regions. Mr. Pearson said that he does not see the threat the same way. Mr. Lee said that he can easily see more counties requesting more changes. When this changes in the future then the payments could change. Mr. Jordan said that this may be an issue for the regions to take up. It is not the Boards function to make this change. Mr. Spratt agreed. Ms. Haney said that at some point someone made this decision. Is there someone at MDH that has this authority? She asked for further research. Mr. Schoenbaum said that there has always been a slight difference in the regional boundaries. He said that there is not someone at MDH that has this authority.

Motion carried.

Mr. Messelt said that Chisago and Isanti continue to work with the Central Region on this transition.

Announcement: Mr. Snoke announced that Dr. Satterlee's wife had a baby boy.

Mr. Spratt said that the election of officers will occur at the end of the meeting today.

VII. Strategic Planning Update/Next Steps

Ms. Deming provided an update. The first handout is the proposal to proceed to complete the strategic plan without the whole Board. She asked to form a small group to discuss strategic planning and bring a recommendation to the Board in January.

Ms. Deming said that she reviewed the vision document and did some sorting. She described the changes to the document. She said that she would like the small group to discuss this document and then we would want to address the Board's role in implementation. What is the staff role in implementation? The governing Board role is different. The staff completes the work. The Board has established the vision. We are establishing what we want to accomplish. We set policy for the organization. She said that she would like to review the content of the vision with this group. Where is the delegation to staff? What is the measurement? What are the indicators of success? Staff determines how to accomplish the goal. One discussion is executive limitations. The IOP states what the Executive Director and staff are not allowed to do. The Board monitors the success of the activities of the staff. You engage with the stakeholders to determine success. The staff develops action plans and completes the work. These recommendations will be presented in January. Ms. Deming said that we invited some Board members to participate in the subcommittee. If they all accept we will schedule a meeting. The members who volunteered are as follows: Ms. Consie, Ms. Deschaine, Dr. Fink Kocken, Dr. Satterlee, Mr. Schoenbaum, and Dr. Thomas. Ms. Deming thanked the volunteers and said that you will be receiving information on a future meeting. Mr. Spratt thanked Ms. Deming and the subcommittee members.

VIII. Emergency Management Presentation

Ms. Biladeau said that today's presentation is part of the Board orientations that will be given at each of the Board meetings to introduce the functional areas performed by staff per statute. She introduced: Mr. (Joe) Kelly and Mr. Ketterhagen of HSEM. Mr. Carlson and Ms. Marchetti from the Minnesota Department of Health and Mr. Norlen of the EMSRB Staff. Ms. Biladeau said that she also would like to thank our partners in these efforts this includes both state and local partners. Due to limited time to present we will be focusing on state agency partners we work with most closely and their roles and responsibilities. I would like to stress the importance of our non-state agency partners who provide the resources and do extensive planning which is invaluable for a response. The role of the state agencies is to coordinate the resources statewide. Just a quick side-note, since we are short on time today, if we run out of time for questions we will be distributing a questionnaire and the responses will be posted on the EMSRB website.

Mr. Kelly, Assistant Director for Homeland Security and Emergency Management (HSEM) introduced Mr. Ketterhagen, Logistic Chief for HSEM. Mr. Kelly said that this is a review for many of the Board members. He provided a power point presentation. He said he would welcome questions. HSEM is division of the Department of Public Safety that was created in 1951. He quoted the mission statement. Mr. Kelly indicated the authority for HSEM falls under Minnesota Statutes, Chapter 12. HSEM is the state agency who coordinates the disaster response and recovery efforts for Minnesota. He quoted "all disasters are local" Mr. Kelly said that the Minnesota Duty Officers are employees of the Bureau of Criminal Apprehension (BCA). Mr. Kelly indicated the Duty Officer is the person to contact 24/7 if state assistance is being requested. He described the SEOC functions. Ms. Biladeau said that we appreciate our partners and asked the presenters to describe, how decisions are made for determining which resources send for resources?

Mr. Norlen provided a slide show and described the Boards' authority and responsibility in statute and rules. Mr. Norlen provided additional handouts on the Boards' responsibility. He said that we are required to comply with the Governor's Executive Order 11-03. The Executive Director and Board Chair are

responsible for these duties. Mr. Norlen said that Minnesota Statute, section 144E.266 and Minnesota Rule 4690.311 details suspension of specific Chapter 144E statutes during declared disasters. Mr. Norlen described the responsibilities in the MEOP. We have a support role for certain functions.

Mr. Norlen said that in August 2008 the statute was put in effect that requires emergency management training for one employee of our agency. We currently have two employees that hold emergency management certification. (Ms. Biladeau and Mr. Norlen)

Mr. Norlen said that we coordinate with other agencies in carrying out our duties. We coordinate the resources that are deployed at the local level. Mr. Norlen said that MNSTAR information can be used to contact ambulance services.

Ms. Biladeau said that we have one staff person on call 24/7 and could receive a page to respond at any time. For example, 4 a.m. call for the Prairie Island Nuclear plant. Ms. Biladeau asked Mr. Norlen to describe the flow chart of incident response. Mr. Norlen explained how resources are requested. We have MNTRAC as a tool for tracking resources. Ms. Biladeau said that when we get the call and are called to the State Emergency Operations Center we are working with our partners and we have chat groups on MNTRAC to coordinate resources. There is an advantage of having local resources and an EMS Specialist in each region to give information about available resources in the local disaster effort. We broadcast a message asking for resources.

Ms. Olson said that when there are requests for resources we need to determine what we are we trying to accomplish and what it will take to fulfill the request. We need to provide notice that an event is happening but resources are not yet requested. We need to determine what would happen if the disaster would expand. Ms. Biladeau said that this is a fast moving/changing environment.

Mr. Norlen repeated that all disasters are local. Requests follow the proper channels for response. We work with our partners for preparedness and follow NIMS.

Ms. Marchetti said that we work on health care preparedness. We are here to discuss the mobile medical resources that MDH has. We have two federal grants providing funding for these resources. We want to discuss how this intersects with emergency management. Our grants help health departments and health care system preparedness systems. The key to a health coalition is a formal agreement to share resources and information during a response. We have many partners.

Mr. Carlson said that he wanted to describe how our work intersects with emergency preparedness. How do we identify essential services and how do we provide those services in an event to return to normal in a reasonable time frame. What is the role of public health? We operate MNTRAC under a contract and it has many functions. He described a medical surge. He mentioned Minnesota Responds MRC and what would happen if that was activated. Mr. Carlson said that we have a mobile medical unit that was funded by a federal grant. This could temporarily provide care in a local area that has lost resources. We have developed mobile medical teams to work in the mobile medical units. We are building our resources and practicing our deployments. He referred to statutes that support the ability to provide care during a disaster.

Mr. Spratt asked that questions be submitted in writing and they will be responded to at another meeting.

Mr. Spratt said that due to time constraints the election of officers will occur at the next Board meeting.

Mr. Spratt said that the JPC will be meeting after this meeting.

IX. Executive Director's Report

Ms. Biladeau said that we are looking at the statute that was passed regarding the radio board. We found out that there are several plans and I am working with Public Safety to verify which plans apply. Ms. Biladeau asked the Attorney General's Office to describe the Boards' authority. Mr. Schaefer quoted the statute 144E 103. Subd 5, "the statewide radio board shared radio and communication plan" this is a grey area. The Board has authority to determine an equivalent shared radio and communication plan. The point is to identify what the shared radio and communication plan is and then determine whether ambulance services are in compliance with it. We are looking at what would be required for compliance. We need to provide information to the ambulance services. Ms. Biladeau said that this is now in law and we need to retire the 2007 EMS Radio Communication Plan. We are not radio experts. One question during an inspection is to determine that there is compliance with the radio requirements. The requirements differ in each of the regions. Fleet maps are different and plans are different. Use of 800 Mhz, VHF and UHF varies. Moving forward, we are creating a simple form to have ambulance services fill out to determine their compliance. If an ambulance service is not in compliance we will ask them to develop a plan to come into compliance. We have had discussions with the Attorney General's Office to see what may be required to enforce the statute. We need to have ambulance services demonstrate that they have two-way communications and include this in our inspection requirements. Ms. Biladeau said that we have discussed this with the Statewide Radio Board (and various groups) to address options. We want to move forward with the plan as proposed (above). We will provide a letter with information to ambulance services explaining the new law and what it means in regard to inspections and regulatory requirements.

Mr. Spratt said that sometimes when a change occurs that is a well-meaning, it may have unintended consequences. In the future we need to ask for time to research a request and develop a response before this comes to the Board for consideration so we can make better decisions and have less conflict.

X. Public Comment

Mr. Romero said that he is working with partners in developing transition materials to go to the new education format. We want guidance from the Board on the materials. The National Registry has provided materials. He said that this is on the back burner for the Board. He said that other states have defined this transition. We ask that this move forward.

Ms. Biladeau said that we formed a workgroup that met and is working on the transition. Minnesota is not behind. Other states have different numbers of education programs they approve and offer different levels of support for the new guidelines. We choose to work with our 180 education programs. We are providing rollouts across the state to share information with the education programs (not all states are offering support). Most education programs are teaching the new materials. We will have one transition date in the future. All certifications will be transitioned at the same time. We have conducted 9 statewide rollouts and will be conducting two more; approximately 245 people have attended these sessions and supporting materials are on our website. Staff continues to work with defining the regulatory process for the transition. It is not on the back burner. It is an enormous task to review the materials and develop a regulatory process for the transition which maintains public protection--the Board is responsible for ensuring that systems and criteria are in place to assess whether or not an education program is capable and ready to transition and the students will be taught the new standards. We do not want to set requirements and then make changes. We do not see any harm for the Board to continue with the process they approved with the informational rollouts and then provide regulatory rollouts and one transition date to allow all 180 programs time to transition. We intend to submit this to the Board in the next several months.

Ms. Nagy asked for approval of the 2013 Board Meeting Schedule. Mr. Spratt referred to the 2013 proposed Board meeting schedule. Mr. Guiton moved approval. Ms. Tanner seconded. Motion carried.

Note: The Board chair requested a closed session to discuss the budget.

XI. Adjourn

Reviewed and Approved by:

Kelly Spratt, Chair

Mr. Guiton moved to adjourn. Mr. Gormley seconded. Meeting adjourned 2:20 p.m.

Juin to Lee	
	1/22/13

Date